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# UTILITY PATENT APPLICATION TRANSMITTAL

(Only for new nonprovisional applications under 37 CFR 1.53(b))

Attorney Docket No. **McMillan.1422**  
 First Inventor **Stacy McMillan**  
 Title **Portable High-Hat Device**  
 Express Mail Label No. **EV 349853183 US**

17602 U.S. PTO  
10/603457  
06/24/03

## APPLICATION ELEMENTS

See MPEP chapter 600 concerning utility patent application contents.

1. ☒ Fee Transmittal Form (e.g., PTO/SB/17)  
*(Submit an original and a duplicate for fee processing)*
2. ☒ Applicant claims small entity status.  
 See 37 CFR 1.27.
3. ☒ Specification [Total Pages **16**]  
*(preferred arrangement set forth below)*
- Descriptive title of the invention
  - Cross Reference to Related Applications
  - Statement Regarding Fed sponsored R & D
  - Reference to sequence listing, a table, or a computer program listing appendix
  - Background of the Invention
  - Brief Summary of the Invention
  - Brief Description of the Drawings (if filed)
  - Detailed Description
  - Claim(s)
  - Abstract of the Disclosure
4. ☒ Drawing(s) (35 U.S.C. 113) [Total Sheets **4**]
5. Oath or Declaration [Total Pages **2**]
- a. ☒ Newly executed (original or copy)
- b. ☐ Copy from a prior application (37 CFR 1.63 (d))  
*(for continuation/divisional with Box 18 completed)*
- i. ☐ **DELETION OF INVENTOR(S)**  
 Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).
6. ☐ Application Data Sheet. See 37 CFR 1.76

ADDRESS TO: Assistant Commissioner for Patents  
 Box Patent Application  
 Washington, DC 20231

7. ☐ CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)
8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)
- a. ☐ Computer Readable Form (CRF)
- b. Specification Sequence Listing on:
- i. ☐ CD-ROM or CD-R (2 copies); or
  - ii. ☐ paper
- c. ☐ Statements verifying identity of above copies

## ACCOMPANYING APPLICATION PARTS

9. ☐ Assignment Papers (cover sheet & document(s))
10. ☐ 37 CFR 3.73(b) Statement ☒ Power of Attorney  
*(when there is an assignee)*
11. ☐ English Translation Document (if applicable)
12. ☐ Information Disclosure Statement (IDS)/PTO-1449 ☐ Copies of IDS Citations
13. ☐ Preliminary Amendment
14. ☒ Return Receipt Postcard (MPEP 503)  
*(Should be specifically itemized)*
15. ☐ Certified Copy of Priority Document(s)  
*(if foreign priority is claimed)*
16. ☐ Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.
17. ☐ Other: .....

18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:

☐ Continuation ☐ Divisional ☐ Continuation-in-part (CIP) of prior application No.: \_\_\_\_\_

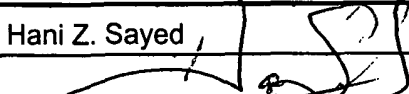
Prior application information: Examiner: \_\_\_\_\_ Group Art Unit: \_\_\_\_\_

For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

## 19. CORRESPONDENCE ADDRESS

☒ Customer Number or Bar Code Label **000027547** or ☐ Correspondence address below  
*(Insert Customer No. or Attach bar code label here)*

Name	Hani Z. Sayed				
	Murphey & Murphey, A.P.C.				
Address	701 Palomar Airport Road, Suite 260				
City	Carlsbad	State	California	Zip Code	92009
Country	US	Telephone	760-431-0091	Fax	760-431-9441

Name (Print/Type)	Hani Z. Sayed	Registration No. (Attorney/Agent)	52,544
Signature		Date	4-24-03

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231.

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**FEE TRANSMITTAL**  
**for FY 2003**

Effective 01/01/2003. Patent fees are subject to annual revision.

☒ Applicant claims small entity status. See 37 CFR 1.27**TOTAL AMOUNT OF PAYMENT** (\$)**375.00****Complete if Known**

Application Number	
Filing Date	
First Named Inventor	Stacy McMillan
Examiner Name	
Art Unit	
Attorney Docket No.	McMillan.1422

**METHOD OF PAYMENT (check all that apply)**☒ Check ☐ Credit card ☐ Money Order ☐ Other ☐ None☐ Deposit Account:

Deposit Account Number	
Deposit Account Name	

The Commissioner is authorized to: (check all that apply)

☐ Charge fee(s) indicated below ☐ Credit any overpayments  
☐ Charge any additional fee(s) during the pendency of this application  
☐ Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.
**FEE CALCULATION****1. BASIC FILING FEE**

Large Entity		Small Entity		Fee Description	Fee Paid
Fee Code	Fee (\$)	Fee Code	Fee (\$)		
1001	750	2001	375	Utility filing fee	
1002	330	2002	165	Design filing fee	
1003	520	2003	260	Plant filing fee	
1004	750	2004	375	Reissue filing fee	375
1005	160	2005	80	Provisional filing fee	
<b>SUBTOTAL (1)</b>					<b>(\$)<b>375</b></b>

**2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE**

Total Claims		Extra Claims		Fee from below		Fee Paid	
	20	-20** = 0	X	9	=	0	
Independent Claims	2	-3** = 0	X	42	=	0	
Multiple Dependent							

Large Entity		Small Entity		Fee Description
Fee Code	Fee (\$)	Fee Code	Fee (\$)	
1202	18	2202	9	Claims in excess of 20
1201	84	2201	42	Independent claims in excess of 3
1203	280	2203	140	Multiple dependent claim, if not paid
1204	84	2204	42	** Reissue independent claims over original patent
1205	18	2205	9	** Reissue claims in excess of 20 and over original patent

**SUBTOTAL (2)** (\$)**0**

\*\*or number previously paid, if greater; For Reissues, see above

**FEE CALCULATION (continued)****3. ADDITIONAL FEES**

Large Entity Small Entity

Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description	Fee Paid
1051	130	2051	65	Surcharge - late filing fee or oath	
1052	50	2052	25	Surcharge - late provisional filing fee or cover sheet	
1053	130	1053	130	Non-English specification	
1812	2,520	1812	2,520	For filing a request for <i>ex parte</i> reexamination	
1804	920*	1804	920*	Requesting publication of SIR prior to Examiner action	
1805	1,840*	1805	1,840*	Requesting publication of SIR after Examiner action	
1251	110	2251	55	Extension for reply within first month	
1252	410	2252	205	Extension for reply within second month	
1253	930	2253	465	Extension for reply within third month	
1254	1,450	2254	725	Extension for reply within fourth month	
1255	1,970	2255	985	Extension for reply within fifth month	
1401	320	2401	160	Notice of Appeal	
1402	320	2402	160	Filing a brief in support of an appeal	
1403	280	2403	140	Request for oral hearing	
1451	1,510	1451	1,510	Petition to institute a public use proceeding	
1452	110	2452	55	Petition to revive - unavoidable	
1453	1,300	2453	650	Petition to revive - unintentional	
1501	1,300	2501	650	Utility issue fee (or reissue)	
1502	470	2502	235	Design issue fee	
1503	630	2503	315	Plant issue fee	
1460	130	1460	130	Petitions to the Commissioner	
1807	50	1807	50	Processing fee under 37 CFR 1.17(q)	
1806	180	1806	180	Submission of Information Disclosure Stmt	
8021	40	8021	40	Recording each patent assignment per property (times number of properties)	
1809	750	2809	375	Filing a submission after final rejection (37 CFR 1.129(a))	
1810	750	2810	375	For each additional invention to be examined (37 CFR 1.129(b))	
1801	750	2801	375	Request for Continued Examination (RCE)	
1802	900	1802	900	Request for expedited examination of a design application	

Other fee (specify)

\*Reduced by Basic Filing Fee Paid

**SUBTOTAL (3)** (\$)**0****SUBMITTED BY**Name (Print/Type) **Hani Z. Sayed**Registration No.  
(Attorney/Agent)

52,544

(Complete if applicable)

Telephone 760-431-0091

Signature

Date

6-24-03

**WARNING: Information on this form may become public. Credit card information should not be included in this form. Provide credit card information and authorization on PTO-2038.**

This collection of information is required by 37 CFR 1.17 and 1.27. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, Washington, DC 20231.

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<b>PATENT APPLICATION FEE DETERMINATION RECORD</b>						Application or Docket Number <b>McMillan, 1422</b>	
<b>CLAIMS AS FILED – PART I</b>							
(Column 1)		(Column 2)		SMALL ENTITY		OR OTHER THAN SMALL ENTITY	
FOR	NUMBER FILED	NUMBER EXTRA		RATE	FEE	RATE	FEE
BASIC FEE (37 CFR 1.16(a))					\$ 375		\$ _____
TOTAL CLAIMS (37 CFR 1.16(c))	20	minus 20 =	• 0	x \$ 9 =	0	x \$ _____ =	
INDEPENDENT CLAIMS (37 CFR 1.16(b))	2	minus 3 =	• 0	x \$ 42 =	0	x \$ _____ =	
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))				+ \$ _____ =		+ \$ _____ =	
* If the difference in column 1 is less than zero, enter "0" in column 2.				TOTAL	375	OR TOTAL	
<b>CLAIMS AS AMENDED – PART II</b>							
(Column 1)		(Column 2)		SMALL ENTITY		OR OTHER THAN SMALL ENTITY	
AMENDMENT A	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDITIONAL FEE	RATE	ADDITIONAL FEE
Total (37 CFR 1.16(c))	•	Minus	**	x \$ _____ =		x \$ _____ =	
Independent (37 CFR 1.16(b))	•	Minus	***	x \$ _____ =		x \$ _____ =	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))				+ \$ _____ =		+ \$ _____ =	
				TOTAL ADD'L FEE		OR TOTAL ADD'L FEE	
(Column 1)		(Column 2)		SMALL ENTITY		OR OTHER THAN SMALL ENTITY	
AMENDMENT B	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDITIONAL FEE	RATE	ADDITIONAL FEE
Total (37 CFR 1.16(c))	•	Minus	**	x \$ _____ =		x \$ _____ =	
Independent (37 CFR 1.16(b))	•	Minus	***	x \$ _____ =		x \$ _____ =	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))				+ \$ _____ =		+ \$ _____ =	
				TOTAL ADD'L FEE		OR TOTAL ADD'L FEE	
(Column 1)		(Column 2)		SMALL ENTITY		OR OTHER THAN SMALL ENTITY	
AMENDMENT C	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDITIONAL FEE	RATE	ADDITIONAL FEE
Total (37 CFR 1.16(c))	•	Minus	**	x \$ _____ =		x \$ _____ =	
Independent (37 CFR 1.16(b))	•	Minus	***	x \$ _____ =		x \$ _____ =	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))				+ \$ _____ =		+ \$ _____ =	
				TOTAL ADD'L FEE		OR TOTAL ADD'L FEE	

\* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  
 \*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".  
 \*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".  
 The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

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